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23623 7590 09/27/2004

AMIN & TUROCY, LLP
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12/15/2004 SFELEKE2 00000035 10645363

01 FC:1501 1400.00 OP
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Heather Holmes	(Depositor's name)
<i>Heather Holmes</i>	(Signature)
12/14/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/645,363	08/21/2003	Khoi A. Phan	H1898 / AMDP977US	7463

TITLE OF INVENTION: REFRACTIVE INDEX SYSTEM MONITOR AND CONTROL FOR IMMERSION LITHOGRAPHY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	1400.00	\$300	1700.00	12/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GEYER, SCOTT B	2829	438-007000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. AMIN & TUROCY, LLP

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ADVANCED MICRO DEVICES, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SUNNYVALE, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 58-1063 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Himanshu S. Amin

Date 12/14/04

Typed or printed name Himanshu S. Amin

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